

DECLARATION FOR PATENT APPLICATION

Docket Number (Optional)

AFD 668

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole (or joint) inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled ODOR DISCRIMINATION USING BINARY SPIKING NEURAL NETWORK, the specification of which is attached hereto unless the following box is checked:

☐ was filed on _____ as United States Application Number or PCT International Number _____ and was amended on _____.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)

Priority Claimed

_____ (Application Number)	_____ Country	_____ (Day/Month/Year Filed)	<input type="checkbox"/> Yes <input type="checkbox"/> No
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_____ (Application Number)	_____ Country	_____ (Day/Month/Year Filed)	<input type="checkbox"/> Yes <input type="checkbox"/> No
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I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below.

<u>60/491,452</u> (Application Number)	<u>July 30, 2003</u> (Filing Date)
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_____ (Application Number)	_____ (Filing Date)
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I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

_____ (Application Number)	_____ (Filing Date)	_____ (Status - patented, pending, abandoned)
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_____ (Application Number)	_____ (Filing Date)	_____ (Status - patented, pending, abandoned)
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I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

<u>Gina S. Tollefson, Reg. No. 39,049, Gerald B. Hollins, Reg. No. 25,452 and Thomas L. Kundert, Reg. No. 27,247</u>		
Address all telephone calls to	<u>GINA S. TOLLEFSON</u>	at telephone number <u>(937) 255-2838</u>
Address all correspondence to	<u>AFMCLO/JAZ, Bldg 11, Room 100</u>	
	<u>2240 B Street</u>	
	<u>Wright-Patterson AFB OH 45433-7109</u>	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

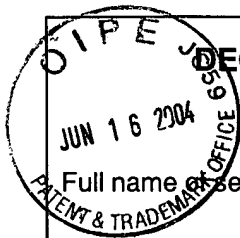
Full name of sole or first inventor (given name, family name) JACOB ALLENInventor's signature Jacob Allen Date: 4-5-04Residence 2871 Troy Center Drive #5014, Troy MI 48084 Citizenship: U.S.A.Post Office Address Same as residence

☒ Additional inventors are being named on separately numbered sheets, attached hereto.

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Full name of second inventor (given name, family name) ROBERT L. EWING

Second inventor's signature Robert L. Ewing

Date: 8th April 2004

Residence 4309 Schrubbs Drive, Kettering OH 45429

Citizenship U.S.A.

Post Office Address Same as residence

Full name of third inventor (given name, family name) HODA S. ABDEL-ATY-ZOHDY

Third inventor's signature _____

Date: _____

Residence _____

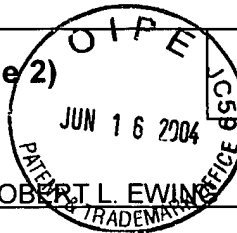
Citizenship U.S.A.

Post Office Address Same as residence

DECLARATION FOR PATENT APPLICATION (Page 2)

Docket Number (Optional)

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Full name of second inventor (given name, family name)

ROBERT L. EWING

Second inventor's signature

Date:

Residence 4309 Schrubbs Drive, Kettering OH 45429

Citizenship

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Post Office Address Same as residence

Full name of third inventor (given name, family name)

HODA S. ABDEL-ATY-ZOHDY

Third inventor's signature

Date:

Residence 3032 PALMAIRE Drive, Rochester Hills

Citizenship

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Post Office Address MI, 48309 Same as residence

USA